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APPLICANTS

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** CONTINUING DATA *****

THIS APPLICATION IS A 371 OF PCT/AU99/00365 05/14/1999

** FOREIGN APPLICATIONS *****

AUSTRALIA PP3547 05/15/1998

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/22/2001

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 12	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature 	Initials			

ADDRESS

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TITLE

Decentralised patient management system

FILING FEE RECEIVED 654	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
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